SCHEDULE B	(FEC	Form	3X)				
ITEMIZED DISBURSEMENTS							

ITEMIZED DISBURSEMENTS		Use separate schedule(s)	FOR LINE NUMBER: PAGE 1 OF 3 (check only one)					
11	LIMIZED DISBONSLIMENTS	for each category of the Detailed Summary Page	21b	22 🕱 23 🗌 24 📗 25 📗 26				
Δ	y information copied from such Reports and Statem	pents may not be sold or use	d by any perso	28a 28b 28c 29 30b				
	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.							
\setminus	NAME OF COMMITTEE (In Full)							
V	American Association of Clinical Endocrinologists, Inc AACEPAC							
Α.	Full Name (Last, First, Middle Initial)			Date of Disbursement				
Λ.	Friends of Lois Capps							
	Mailing Address P.O. Box 23940			1 0 1 6 2 0 1 4				
	City Santa Barbara S	121						
	Purpose of Disbursement contribution 0 1 1			Amount of Each Disbursement this Period				
•	Candidate Name Lois Capps Category/ Type			1 0 0.0 0				
		Primary X General						
	State: CA District: 24th	Other (specify) ▼		,				
_	Full Name (Last, First, Middle Initial)							
В.				Date of Disbursement				
	Mailing Address P. O. Box 16381 Zip Code City State Zip Code Sugar Land TX 77496			1 0 1 6 2 0 1 4				
	Purpose of Disbursement contr	ibution	0 1 1	Amount of Each Disbursement this Period				
	Candidate Name Pete Olson Category/ Type			5 0 0.0 0				
		nent For: Primary X General Other (specify)						
_	State: TX District: 22nd	\ 		·				
С.	Full Name (Last, First, Middle Initial) C. Date of Disbursement							
O.	Boehner for		Many / Dag / Maxadah					
	Mailing Address 206B Redbud S	-	10 16 2014					
	City Celebration State Zip Code State FL 34747 Purpose of Disbursement Contribution Candidate Name John Boehner Category/ Type							
				Amount of Each Disbursement this Period				
				1,000.00				
		nent For: Primary X General Other (specify) ▼						
_	State: OH District: 8th							
5	SUBTOTAL of Disbursements This Page (optional)							
ŀ	TOTAL This Period (last page this line number only)							